POSITION	INITIALS	ID NO.	DATE
		-	
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	·		2
FORMALITY REVIEW	Mul	6S7	3/101
RESPONSE FORMALITY REVIEW	7		

INDEX OF CLAIMS

	~	Rejected	N	Non-elected
A.		Allowed	- 1	Interference
		(Through numeral) Canceled	Α	Appeal
1/4		Restricted	0	Objected

				[a]	
Claim Date	Ctaim	<u> </u>	Date	Claim Date	
Final	Final			Final	-
	51			101	
	52	2		102	
H J/I	53	3		103	
	54	4		104	
	55	5		105	
	56	6		106	
	57	7		107	
	56	8		108	
	59	9		109	
100 100 1 1 1 1 1 1	60	0		110	
	6			111	
12	62			112	
18	6:			113	
16.	64			114	
5 ,-	65			115	
	66			116	
** 	67			117	
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	69	9		119	
46	70	0		120	.
	7	1		121	
	72	2		122	
	7:	3		123	
	7.	4		124	
	7:	5		125	
	76	6		126	
	7	7		127	
28	70	8		128	
29	79			129	
30	8	30		130	
31	1 8	31		131	
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37	8	17		137	
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39	8	19		139	
40		0		140	
41				141	
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43		13	 	143	
44		94		144	
45		5	 	145	
46		6		146	 - - -
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If more than 150 claims or 10 actions staple additional sheet here

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